

## **Application Data Sheet**

### **Application Information**

<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	None
<b>Computer Readable Form (CRF)?::</b>	No
<b>Title::</b>	HIGH CHAIR
<b>Attorney Docket Number::</b>	061270-0902
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	1
<b>Total Drawing Sheets::</b>	21
<b>Small Entity?::</b>	No
<b>Petition included?::</b>	No
<b>Secrecy Order in Parent Appl.?::</b>	No

### **Applicant Information**

<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	US
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Patrick
<b>Family Name::</b>	NOLAN
<b>City of Residence::</b>	Royersford
<b>State or Province of Residence::</b>	PA
<b>Country of Residence::</b>	US
<b>Street of mailing address::</b>	2103 Brooke Drive

**City of mailing address::** Royersford  
**State or Province of mailing address::** PA  
**Postal or Zip Code of mailing address::** 19468

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** James Murray Forbes  
**Family Name::** HUTCHINSON  
**City of Residence::** Mohnton  
**State or Province of Residence::** PA  
**Country of Residence::** US  
**Street of mailing address::** 25 Frog Hollow Lane  
**City of mailing address::** Mohnton  
**State or Province of mailing address::** PA  
**Postal or Zip Code of mailing address::** 19468

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** William B.  
**Family Name::** BELLOWS  
**City of Residence::** Wyomissing  
**State or Province of Residence::** PA  
**Country of Residence::** US  
**Street of mailing address::** 1409 Monroe Avenue  
**City of mailing address::** Wyomissing

**State or Province of mailing address::** PA  
**Postal or Zip Code of mailing address::** 19610  
**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Michael L.  
**Family Name::** LONGENECKER  
**City of Residence::** Ephrata  
**State or Province of Residence::** PA  
**Country of Residence::** US  
**Street of mailing address::** 15 Allen Road  
**City of mailing address::** Ephrata  
**State or Province of mailing address::** PA  
**Postal or Zip Code of mailing address::** 17522

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Jason A.  
**Family Name::** CARPENTER  
**City of Residence::** Reinholds  
**State or Province of Residence::** PA  
**Country of Residence::** US  
**Street of mailing address::** 131 Redstone Circle  
**City of mailing address::** Reinholds  
**State or Province of mailing address::** PA

**Postal or Zip Code of mailing address::** 17569

**Correspondence Information**

**Correspondence Customer Number::** 22428

**E-Mail address::** PTOMailWashington@Foley.com

**Representative Information**

<b>Representative Customer Number::</b>	22428	
---	-------	--

**Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	An application claiming the benefit under 35 USC 119(e)	60/457,325	03/26/2003

**Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

**Assignee Information**

**Assignee name::** Graco Children's Products Inc.